

(Type twice in this copy only)

2700 INTERNAL TRANSFER REQUEST FOR S.N.

10/40/85

DATE: 5-72	FROM: <u>[Signature]</u> (print name)
FORWARD TO: A. An Unit: 2661 B. Class: 370 C Subclass:	REASON(S): A. You had Parent <input checked="" type="checkbox"/> (check box) B. See Title <input checked="" type="checkbox"/> (check box) C. See Abstract <input checked="" type="checkbox"/> (check box) D. See Claim(s):

FURTHER EXPLANATION IF NEEDED:

Of Dr from

BEST AVAILABLE COPY

DATE:	FROM: (print name)
FORWARD TO: A. An Unit: B. Class: C Subclass:	REASON(S): A. You had Parent <input type="checkbox"/> (check box) B. See Title <input type="checkbox"/> (check box) C. See Abstract <input type="checkbox"/> (check box) D. See Claim(s):

FURTHER EXPLANATION IF NEEDED:

DATE:	FROM: (print name)
FORWARD TO CLASSIFIER <div style="background-color: black; width: 100px; height: 50px;"></div>	REASON(S): A. You had Parent <input type="checkbox"/> (check box) B. See Title <input type="checkbox"/> (check box) C. See Abstract <input type="checkbox"/> (check box) D. See Claim(s):

FURTHER EXPLANATION IF NEEDED:

DISPOSITION BY 2700 CLASSIFICATION

DATE:	CLASSIFIER:
FORWARD TO: A. An Unit: B. Class: C Subclass:	REASON(S): A. You had Parent <input type="checkbox"/> (check box) B. See Title <input type="checkbox"/> (check box) C. See Abstract <input type="checkbox"/> (check box) D. See Claim(s):

FURTHER EXPLANATION IF NEEDED: